

Chemical

US EPA RECORDS CENTER REGION 5



464866

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage \$ 129  
 Certified Fee 230  
 Return Receipt Fee (Endorsement Required) 175  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ 434



Sent To  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4  
 PS Form 3800, J

Randall Division, Randall Company  
 c/o Textron, Inc.  
 40 Westminster St.  
 Providence, RI 02903-2596

M. Adams  
 SR-6J re: CRS

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Randall Division, Randall Company  
 c/o Textron, Inc.  
 40 Westminster St.  
 Providence, RI 02903-2596

**COMPLETE THIS SECTION ON DELIVERY**

- A. Received by (Please Print Clearly) *Antony...* B. Date of Delivery 6/10
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below

**SUPERFUND DI**

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7001 0320 0006 1450 5433

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424